श्री राम विलास पासवान : सभापति जी, सैंट्रल गवर्नमेंट के अलग-अलग मंत्रालय है, अलग-अलग विभाग है ...(**व्यवधान**)...

श्री तपन कुमार सेन : सर, लेकिन गवर्नमेंट तो एक ही है, it is a collective responsibility.

श्री राम विलास पासवान : सभापति जी, जैसा कि मैने कहा कि हम शुरू से ही चाहते है कि SAIL को हम एक बड़ी कंपनी के रूप में उभारें और आपको मालूम हो कि IISCO का merger हमने SAIL के साथ कर दिया और झटके में कर दिया, यह सबसे बड़ा काम था, वह कंपनी बंद होने वाली थी, लेकिन हमने उसका merger कर दिया और हम 10,000 करोड़ रूपए उसके विकास पर खर्च कर रहें हैं । जैसा हमने कहा कि BRL का merger हमने कर दिया है, MEL का merger का प्रस्ताव SAIL ने अपने तरीके से पास कर लिया है, एक Steel Complex Limited है, केरल में, उसका प्रस्ताव विचाराधीन है, पश्चिम बंगाल में NISCO का भी है, ये सारे प्रस्ताव विचाराधीन है । SAIL ने अपनी तरफ से प्रस्ताव पास कर दिया कि हम इसका merger चाहते हैं, लेकिन अगर सरकार के किसी विभाग को या राज्य सरकार को इस पर आपत्ति है, तो उस आपत्ति का जब तक आप समाधान नहीं करेंगे, तब यह काम नहीं हो सकता है, पार्लियामेंटरी डेमोक्रेसी तो यही होती है, और क्या होती है ? इसलिए हम लोग इस ओर प्रयत्नशील है और हमारी हार्दिक इच्छा है कि इसका merger हो । हमने इस मामले को गंभीरता से लिया है और हम चाहेंगे कि जल्दी से जल्दी NINL का merger SAIL में हो जाए ।

श्री तपन कुमार सेन : इसमें भी एक झटकें की जरूरत है ।

MS. MABEL REBELLO: Sir, I am told that the SAIL has a plan to invest something like Rs. 12,300 crores in order to increase the capacity of Nilachal Ispat Nigam Limited to 3.5 million tonnes by 2010. I would like to know whether the hon. Minister is really serious about it, and if it is so, what is the plan that he has got for the next two-three years?

SHRI RAM VILAS PASWAN: How can 1 disclose all these things, at this moment, when there is no merger? Once the merger takes place, then, I will be able to answer this question.

*462. [The questioners (Shri Dara Singh and Shri Ramdas Agarwal) were absent. For answer *vide* page 24 *infra.]*

*463. [The questioner (Shri Kalraj Mishra) was absent. For answer *vide* page 24 *infra.]*

*464. [The questioners (Shri Rudra Narayan Pany and Shri Mahmood A. Madani) were absent. For answer *vide* page 26 *infra.]*

Need for review of Pulse Polio Programme

*465. DR. K. KESHAVA RAO: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether it is a fact that the Pulse Polio Programme needs a review in view of the cases reported in the first two months of the year 2008;

(b) if so, the details of the cases reported in States; and

(c) what concrete action Government is taking to fulfil its promise of total eradication of polio?

THE MINISTER OF HEALTH AMD FAMILY WELFARE (DR. ANBUMAN1 RAMDOSS): (a) to (c) A Statement is laid on th Table cf the House.

Statement

(a) and (b) National Polio Eradication Programme is reviewed bi-annually by the India Expert Advisory Group on polio (IEAG) comprising of National and International Experts from World Health Organization (WHO), United Nation Children's Fund (UNICEF) and Centre for Disease Control (CDC) Atlanta. The last review was undertaken on 19-20th December, 2007.

The number of polio cases reported in the first two months of the year are the tail end of 2007 outbreak in Uttar Pradesh and Bihar. The number of cases reported in the first two months are 163 out

of which 25 cases are from Uttar Pradesh and 134 cases from Bihar and 1 each from Orissa, Haryana, Maharashtra and Delhi.

(c) The India Expert Advisory Group on Polio Eradication, which reviewed the programme in December, recommended that the programme continue to focus on Type 1 in view of its higher disease burden and propensity to cause large outbreaks and travel long distances to achieve polio eradication at the earliest, following steps have been taken by the Government in early part of 2008:—

— National Immunization days were implemented in January and February, 2008. mOPVI was used in Uttar Pradesh, Bihar, Delhi and other high risk States and Districts and tOPV in other areas.

— Sub National Immunization Round was undertaken in March, 2008 in Uttar Pradesh, Bihar, Delhi, Mumbai and other areas at risk using mOPV3 during 30th March, 2008.

— MoP Up immunization rounds have been implemented in response to detection of Wild polio virus in the State of Maharashtra, Haryana, Orissa.

— 5 more Sub National Round is planned for implementation in UP, Bihar and other areas at risk during April, June, July, September and October, 2008.

Union Health Minister convened meeting of the Health Ministers of polio affected States to discuss the issues and actions required by the State Governments for achieving the goal of zero polio transmission at the earliest in September, 2006 and June, 2007. The Health Ministers of the Sates assured that they are committed for eradication of polio from the country and necessary actions will be taken by the respective States to sustain good quality immunization rounds during the upcoming polio immunization compaings.

The polio eradication strategy was reviewed by Union Health Minister with the experts of ICMR, UNICEF, WHO, NPSP, INCLEN and Rotary on 3rd April, 2008

The Chief Minister of Uttar Pradesh and Bihar has been requested by Union Health Minister to monitor the programme at their level so that effective implementation of interventions takes place in their respective States.

Secretary (Health & FW) reviewed the polio situation at regular intervals with the partners like WHO, UNICEF, Rotary and make appropriate decisions on the actions required for accelerating polio eradication activities.

During the meeting with the State Health Secretaries in July 2007, Union Health Secretary apprised the State Health Secretaries regarding the polio situation and seek their support and commitment to achieve the goal of polio eradication.

To ensure quality of immunization rounds and to achieve high coverage following actions are taken:—

- Improved micro planning in all areas to ensure that no house is missed and no child left unvaccinated. Missed houses are revisited by teams.
- Migratory populations from UP and Bihar are being identified in the States of Punjab, Haryana, Gujarat and these migratory children are being cover during the SNID in UP and Bihar starting from August, 2007.
- In the States of UP and Bihar every new born child is being identified and vaccinated during the polio immunization campaigns and is being tracked for 8 subsequent rounds.
- In order to reach every eligible child during the pulse polio round, apart from the strategy of vaccinating children at fixed booths and house to house visits, efforts in vaccinating children in transit at railway stations, inside long distance trains, major bus stops, market places, religious congregations, major road crossings etc. throughout the country have been itensified.

9 To ensure vaccination of missed children, Accredited Social Health Activists (ASHAs) are involved to mobilize missed children for vaccination.

• Social Mobilization activities are being intensified by involving the local influencers, community and religious leaders to improve community participation and acceptance of polio vaccine.

DR. K. KESHAVA RAO: Sir, I am satisfied with the answer of the hon. Minister, and I don't want to put any supplementary.

MR. CHAIRMAN: Thank you. Any other supplementaries on this? ...*(Interruptions)*...

SHRIMATI BRINDA KARAT: Sir, I have a supplementary on Q.No. 465.

MR. CHAIRMAN: Yes; please, go ahead. ...*(Interruptions)*...

SHRIMATI BRINDA KARAT: Sir, it is a matter of concern that inspite all the efforts of the Government we have not succeeded in entirely eradicating polio. What I understand is that since polio is transmitted through the oral faecal and also through contamination of water, it is clear that just giving the oral polio vaccine may not really succeed in completely eradicating polio. We need a more comprehensive approach, Sir. Therefore, my question to the Minister is this. The Expert Committees which have been formed to monitor, that is fine, but at the same time, since other Ministers are also involved, for example, in sanitation, in clean water, etc. and all these are directly linked to the spread of polio, will the Minister consider having a Committee coordinating the various aspects so that a more comprehensive view on this campaign can be started?

DR. ANBUMANI RAMDOSS: Sir, the hon. Member is right in saying that just giving polio drops will not suffice. On the other side, Sir, in the last few years, out of 35, we have been able to reduce the transmission of poliovirus in 33 States and Union Territories. Today we have come to a stage where there is endemicity of polio only in Uttar Pradesh and Bihar. In the other States we have stopped the endemicity and transmission. Even though there may be some spordic cases due to Uttar Pradesh and Bihar because of migrants going out. So, those sorts of things are there. But coming back to the point, yes, Sir, the problem in Uttar Pradesh and Bihar is due to poor sanitation, poor environmental hygiene , high density of population and because of all these factors, inspite of our giving so much of polio drops, still the transmission goes on. But on the positive side, I would like to say that the National Rural Health Mission is perfectly envisaged for sanitation. It is a holistic component of health, sanitation, drinking water, nutrition, etc. So, the Ministry of HRD, the Ministry of Rural Development, the Panchyat Raj Ministry, the Women and Child Development Ministry and the Health and Family Welfare Ministry are working together in tandem. We have a Committee called the Mission Steering Group where all the Ministers are part of the Group and this Group decides holistically how at the grassroot level we can go about. The National Rural Health Mission is a very big boon to all the States including Uttar Pradesh and Bihar. I am very confident that in due course of time, we will definitely have a lot of facilities to provide clearn drinking water, nutrition, sanitation and also reduce the diseases, including polio. Sir, I have already said that there are only two States now, Uttar Pradesh and Bihar, and I have been personally talking to the Health Ministers and Chief Ministers. My Prime Minister has written letters to the Chief Ministers of Bihar and Uttar Pradesh. Among officers we had a lot of discussions. We had a series of meetings to discuss this problem. Now we have identified the high endemic blocks, rather than districts. The positive aspect is that there are two types of poliovirus one is the PI and the other is P3. We have eradicated P2 from India. PI is highly pathogenic and endemic and it transmits easily and it is very virulent but P3 virus is a little simpler and quieter virus. The good news is that this PI is not there in the whole of Uttar Pradesh. On the contrary, in Bihar we have problems in a few blocks. We are trying to address these problems. There are a number of missed children so we are going there. We are dedicating our entire staff focussing on these blocks.

SHRI RAJEEV SHUKLA: Mr. Chairman, Sir, what I would like to know from the hon. Minister is this. He has already accepted in his answer that there is a major problem in Uttar Pradesh and Bihar to cope with the polio menace. What I am told is that, and I want to get it confirmed from the Minister, there are certain religious bodies and orthodox elements who have launched a propaganda that because of the polio vaccination the children would get impotent. That is a major impediment as far as polio vaccination programme is concerned. Is it true? If yes, what steps have been taken to combat this propaganda?

DR. ANBUMANIRAMDOSS: Sir, it is true that we had problems in the past about some religious sects asking their children and mothers not to take these polio drops. There were rumours that it would cause impotency and sterlity. All these types of rumours are spread and immediately we ask the State Governments to take cognizance of this issue. In participation with the State Governments and Rotary organisations, we have been going door-to-door, village-to-village and block-to-block and discussing this with religious leaders. We have been using the advice and taking the help of the religious leaders of different religions and telling them that there is no problem around, and today we dont have much of this problem though there may be some sporadic cases.

SHRI KUMAR DEEPAK DAS: We are thankful to the Government that they are taking serious steps to eradicate polio in the country. Sir, there were some cases of deaths on oral polio in Assam.Due to these incidents, parents are hesitating to take their children to the polio booths in our State.The percentage of taking polio drops has become low. Sir, is the Government aware about the steps and what steps are taken by the Government?

DR. ANBUMANI RAMDOSS: Usually, there are no deaths attributed to the dispensation of oral polio drops and if there are any, immediately we have the National Polio Surveillance Projects called the NPSP This is one of the largest surveillance projects in the entire world. NPSP has officers in all the States who would immediately go and notify if any case of death attributed to vaccine is there. We have not had any issues from Assam as well but since the hon. Member has said, we will definitely look into that issue and take necessary action.

गन्ना किसानों को बकाया राशि का भुगतान न किया जाना

*466 **श्री वीर पाल सिंह यादव** :

श्री कमाल अख्तर : **††**

क्या उपभोक्ता मामले, खाद्य और सावर्जनिक वितरण मंत्री यह बताने की कृपा करेंगे कि :

(क) क्या सरकार को इस बात की जानकारी है कि उत्तर प्रदेश के किसानों को गन्ने का उचित मूल्य नहीं मिल रहा है;

(ख) किसानों को गन्ना-मूल्य का पिछला बकाया क्यों नहीं मिल रहा है;

(ग) क्या केन्द्रीय सरकार इस बारे में कोई ठोस उपाय कर रही है;

(घ) यदि हां, तो इसका ब्यौरा क्या है और ऐसे उपाय कब तक कर दिए जाएंगे; और

(ड.) यदि नहीं, तो इसके क्या कारण है ?

उपभोक्ता मामले, खाद्य और सार्वजनिक मंत्री (श्री शरद पवार) : (क) से (ड.) एक विवरण सभा पटल पर रखा जा रहा है ।

विवरण

(क) केन्द्रीय सरकार चीनी मिलों द्वारा प्रत्येक चीनी मौसम के लिए गन्ना किसानों को देय गन्ने के सांविधिक न्यूनतम मूल्य (एस.एम.पी.) का निर्धारण करती है । सांविधिक न्यूनतम मूल्य का निर्धारण कृषि लागत और मूल्य

††सभा में यह प्रश्न श्री कमाल अख्तर द्वारा पूछा गया । ।